ATTORNEYS DOCKET	NO

## DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name: I believe I am the original, first and solo inventor (if only one name is listed below) or an original, first and joined inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention

"DISPOSABLE BODY FLUID ABSORBENT PAD" entitled: The specification of which: [x] is attached hereto.

was filed on \_ Application Serial No. and was amended on \_\_\_ (if applicable)

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above. I acknowledge the duly to disclose information which is material to patentability of this application in accordance with

Title 37, Code of Federal Regulations, §1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, \$119, of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN API	PLICATION(S)		Priority	Claimed
2002-283242 (Number)	Japan (Country)	27/09/2002 (Day/Month/Year Filed)	[X] Yes	[ ] No
(Number)	(Country)	(Day/Month/Year Filed)	[ ] Yes	[ ] No

I hereby claim the benefit under Title 35, United States Code, §120, of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose information material to patentability as defined in Title 37. Code of Federal Regulations, §1,56, which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

(Application Serial No.)	(Filing Date)	(Status)	(patented, pending, abandoned)
(Application Serial No.)	(Filing Date)	(Status)	(patented, pending, abandoned)

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under §1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

As a named inventor, I hereby appoint Michael S. Gzybowski, Reg. No. 32,816, of Butzel Long, P.C., as attorney to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

	THE CALLS TO
SEND CORRESPONDENCE TO: D	IRECT TELEPHONE CALLS TO:
Butzel Long, P.C.	lichael S. Gzybowski elephone: (734) 955-3110
Ann Arbor, IM 48104	acsimile: (737) 995-1777
Full name of solo or first inventor: Hikari Kawata	
Residence: Kagawa-ken, JAPAN	Citizenship: <u>Japan</u>
c/o Technical Center, Uni Post Office Address: Wadahama, Toyohama-cho, M	Charm Corporation, 1531-7 Takasuka,
Post Office Address: Wadanama, Toyonama—Cho, Inventor's Signature: 日 ひっし	5/9/2003
Inventor's Signature:	Date
Full name of second joint inventor: Masashi Nakash	
Residence: Kaqawa-ken, JAPAN	Citizenship: <u>Japan</u>
c/o Technical Center, Un: Post Office Address: Wadahama, Toyohama-cho, 1	i-Charm Corporation, 1531-7 Takasuka, Mitoyo-gun, Kaqawa-ken, Japan
Inventor's Signature:	5/9/2003
Inventor's Signature:	Date
Full name of third joint inventor: Kaori Yamauchi	
Residence: Kagawa-ken, JAPAN	Citizenship: Japan
Residence: Kagawa-ken, JAPAN	Onzorowy.
c/o Technical Center, Un Post Office Address: Wadahama, Toyohama-cho,	i-Charm Corporation, 1531-7 Takasuka, Mitovo-gun, Kagawa-ken, Japan
Inventor's Signature:	5 /9 /2003
Inventor's Signature:	Date
Full name of fourth joint inventor:	
Full name of fourth joint inventor.	
Residence:	Citizensnip:
	_
Post Office Address:	
Inventor's Signature:	Date